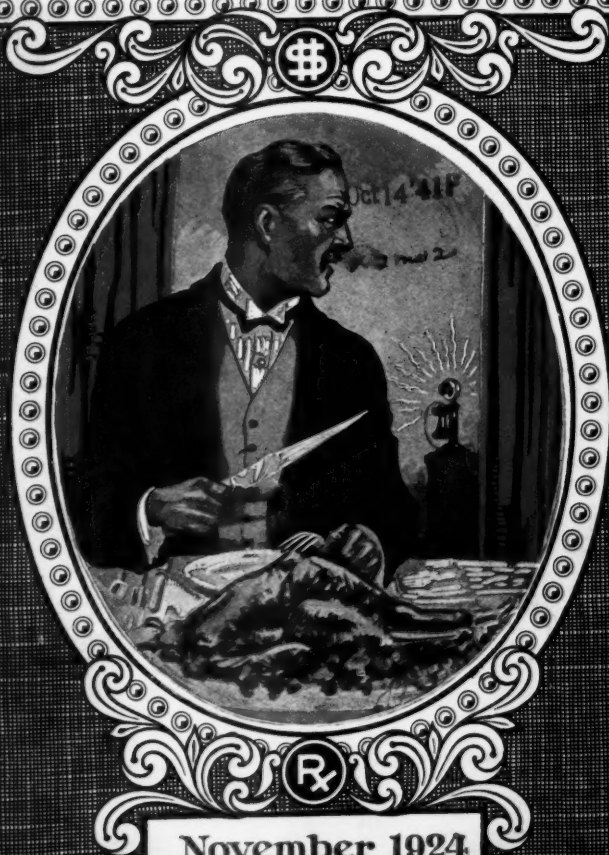


Medical Economics



November 1924

The after-effects of Illness are sometimes
more serious than the disease itself.

Keep well corked in a cool place. Shake the Bottle when
a precipitate settles at the bottom.

COMPOUND SYRUP OF HYPOPHOSPHITES "FELLOWS"

accelerates Convalescence, restores
Energy and Vitality; and for over fifty
years has been known as

"The Standard Tonic"

PREPARED AND GUARANTEED BY THE
FELLOWS MEDICAL MANUFACTURING CO., INC.,
NEW YORK, U.S.A.

Samples and Literature on Request

FELLOWS & CO., CHEMISTS,
ST. JOHN, N. B.

Fellows Medical Manufacturing Co., Inc.

25 Christopher Street, New York, N. Y.

MEDICAL ECONOMICS

The Business Magazine of the Medical Profession

H. Sheridan Baketel, A.M., M.D., Editor



Vol. II Contents for November, 1924 No. 2

GIVING THANKS?	Front Cover
WHICH IS THE FAKE—MEDICAL SCIENCE OF CHIRO- PRACTIC?	Page 7
Carl B. Epps, M. D., Sumter, S. C.	
THE FABLE OF THE DISCOURAGED PATIENT	Page 11
E. N. Reed, M. D., Los Angeles, Cal.	
A CONVENIENT ACCOUNTING SYSTEM	Page 12
Arthur C. Jacobsen, M. D., Brooklyn, N. Y.	
SHOULD PHYSICIANS PATENT THEIR PROFESSIONAL INVENTIONS?	Page 14
Frederick S. Stitt, Esq., Washington, D. C.	
HEALTH PUBLICITY THAT PULLED	Page 17
Walter M. Brunet, M. D., New York, N. Y.	
RECIPROCAL WORK COMPARED WITH GROUP PRACTICE	Page 18
F. W. Bush, M. D., Van Horne, Iowa.	
PERSONAL MEDICINE <i>vs.</i> MASS HEALTH PROTECTION	Page 20
WHAT MAKES THE DOCTOR POOR	Page 22
L. E. Dougherty, M. D., Cumberland, Md.	
EDITORIALS	Page 24
The Gigantic Dimensions of a Year-Old Infant. Our Attitude Toward the Cults.	
GETTING MEDICAL TRUTH ACROSS	Page 27
Oscar E. Blank, M. D., Perryton, Texas.	
KNOW YOUR CLIENTELE	Page 28
J. N. Tracy, M. D., Memphis, Tenn.	
IS "DOCTOR" A MISNOMER?	Page 30
Henry L. Burton, New Orleans, La.	
DEPARTMENTS	
New Instruments and Appliances	Page 34
Financial Department	Page 38
This Month's Free Literature	Page 42

MEDICAL ECONOMICS: Published monthly exclusively for physicians. Circulation 100,000 monthly. Circulation offices, Rutherford, N. J. Editorial and advertising offices, 256 Broadway, New York, N. Y.
The Medical Economics Publishing Co., Inc., Publishers.



When Rheumatism grips, the sustained heat of Antiphlogistine soothes.

AS far as is known to Medical Science there is no real cure for Rheumatism. Osler says "hot applications are soothing"—and when Rheumatism grips, especially in joints and muscles, the self-generated and sustained heat of Antiphlogistine brings blessed relief.

Apply Antiphlogistine Hot and Thick

—as hot as can be borne comfortably by the patient. Once in position and bound snugly with an outer bandage Antiphlogistine will produce and sustain heat upwards to 24 hours because its large c.p. Glycerine content, acting with the fluids of the tissues, sets up a natural generation of heat.

We do not claim that Antiphlogistine will cure Rheumatism, but it does diminish pain and this is a great relief to the patient.

The Denver Chemical Mfg. Company

New York, U.S.A.

Laboratories: London, Sydney, Berlin, Paris,
Buenos Aires, Barcelona, Montreal, Mexico City

Antiphlogistine
TRADE MARK

"Promotes Osmosis"

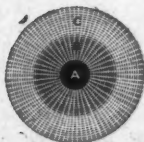


Diagram represents inflamed area. Zone "C" blood flowing freely through underlying vessels, forming current away from Antiphlogistine, whose liquid contents, therefore, follow the line of least resistance entering circulation through the physical process of endosmosis. In zone "A" stasis—no current to overcome Antiphlogistine's hygroscopic property. Line of least resistance for liquid exudate is therefore, in direction of Antiphlogistine. In obedience to the same law exosmosis in this zone, accounts for excess of moisture.



Antiphlogistine poultice after application. Center moist. Periphery virtually dry.

Special Introductory Offer!

Giving \$10.75 for \$5.00

Once Only to Each Physician—Good Only Until January 1, 1925

EVERY PHYSICIAN will profit himself and benefit his patients by using our ethical, therapeutically active and clinically efficient products. Their professional favor demonstrated by continually widening circle of new users and steady increase in re-orders from old. To acquaint non-users we offer:

"D. P. Co." Therapeutic Aids and Adjuncts

NATRICO

Pulvoids No. 373.

Notably effective in High Blood Pressure as demonstrated by over 5,000 clinicians.

200 Pulvoids, regular price...\$1.50

INSULOLS

Suppositories No. 14

Pancreatic Hormone-Bearing Substance Demonstrably Efficacious per rectum in Pancreatic Diabetes.

12 Suppositories, reg. price...\$3.00

TAUROPHEN

Pulvoids No. 299

Adjunct to Natrico as Hepatic, Intestinal Detoxicant and Peristaltic.

200 Pulvoids, regular price...\$1.60

AURAZYME

Pulvoids No. 418

Adjunct to Insulols for Control of Nervous Element of Diabetes Mellitus.

100 Pulvoids, regular price...\$1.00

Capsules No. 72 (oral)—PIT-REN—(hypo) Hyposols No. 30

Combination of Hypophosis Cerebri and Epinephrin. Cardiant and Vaso-Constrictor in Pulmonary and Laryngeal Diseases—as Asthma, Hay Fever, Pneumonia, etc., etc.

50 Capsules, regular price.....\$2.75

3 Hyposols, regular price......90

\$5.00 Cash With Order Gives You Value \$10.75

FREE ON REQUEST—Copy of "Five Therapeutic Aids," Formulary of Dependable Glandular Products and Reprint from Medical World on How to Increase the Doctor's Income, entitled

"DISPENSING vs. PRESCRIBING"

Many Physicians Have Proved the Plan as Ethical, Practical, Profitable and Successful. You Can Do the Same—To Your Own Profit!

Clip Coupon—MAIL TODAY—\$10.75 for \$5

THE DRUG PRODUCTS CO., Inc., 164 Meadow St., Long Island City, N. Y.

Send me, for \$5 enclosed, your \$10.75 for \$5 Special One-Time Introductory Offer, with FREE copy of "Five Therapeutic Aids," Formulary of Dependable Glandular Products and Reprint from Medical World on "Dispensing vs. Prescribing."

Name

Address

City State.....

What "L & F" means
on pharmaceuticals



PURITY

NOTHING is more essential than confidence in the absolute purity of the medicines you prescribe. That confidence every physician has when he specifies "L & F."

Behind every pharmaceutical bearing our label stands the reputation which has been built up by 50 years of service to the medical profession. In purity, accuracy and strength, all "L & F" pharmaceuticals meet, in the highest degree, the requirements of U. S. P. and N. F. standards.

* * *

*ARE you receiving regularly our
quarterly publication, "Notes on New
Remedies and Medical Progress?"*

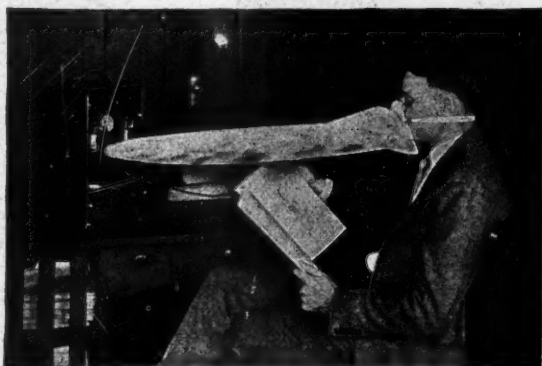
A Lehn & Fink Product

"P-O-4," L & F—A new departure in alkaline therapy. Prepared as suggested by Harriman Research Laboratory, New York. Used as a local antacid in place of sodium bicarbonate. Does not produce systematic alkalization.

Samples on request

LEHN & FINK, INC.
635 Greenwich Street, New York

The W & T Chlorine Inhalator



The W & T Chlorine Inhalator in use.

THERE is no question of the value of Chlorine in the treatment of Acute Respiratory Infections. [Vedder & Sawyer Jour. A. M. A. March 8, 1924.] The problem is not to set up a concentration that may be correct initially, but to maintain that concentration for one hour.



THE W & T Chlorine Inhalator precisely duplicates for individual treatments, the constant flow chamber used by Vedder & Sawyer in their work at Edgewood Arsenal. See TECHNICAL PUBLICATION No. 61 for full details.

Write for a Copy.

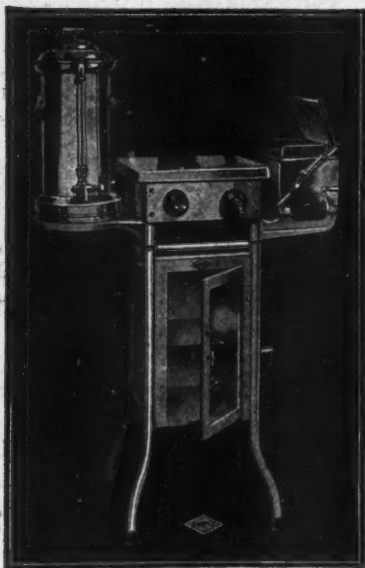
WALLACE & TIERNAN Co., Inc., Newark, N. J.

Gentlemen:

Please send me a copy of Technical Publication No. 61 entitled "Chlorine as a Therapeutic Agent in the treatment of respiratory Infections."

NAME _____

ADDRESS _____



*"Every office needs a
good sterilizer."*

No. 1416

There is no substitute for a good sterilizer

Most things can be imitated or substituted for. The makeshift may "get by" or answer the purpose.

But not so with sterilizers. Either you sterilize or you don't. Either you have the full sterilizer equipment your practice needs, or you are running risks and taking chances.

THE CASTLE No. 1416 shown here is the least in sterilizer equipment that a specialist's office should have. With its instrument sterilizer, water sterilizer, cabinet and table, it is a sound investment.

Send for Complete Catalogue

CASTLE

Complete line of Physicians', Dental, Hospital and Bacteriological Sterilizers
WILMOT CASTLE COMPANY, 1143 University Avenue, Rochester, N. Y.

Which Is the Fake—Medical Science or Chiropractic?

Carl B. Epps, B.Sc., Ph.G., M.D., F.A.C.S.

Sumter, S. C.

Here is a wealth of truth in a nutshell, written by a fearless exponent of truth. This brief abstract of a recently published pamphlet will aid physicians materially in showing up other promulgators of quackery.

THE first recollection that I have of chiropractic was when my attention was called to it by a cheap advertisement several years ago. This depicted a chiropractic "doctor" thumping a patient's back, and gave an alluring description of the wonderful advantages, especially financial, offered to practitioners.

The whole thing was such transparent bunk that, at the time, I did not imagine that it would ever develop into a dangerous, widespread fraud, such as it now is. But time has again proven how pitifully gullible is the general public.

Some time ago two chiropractors opened offices in this town. One of them, who was not licensed, probably learning that the law was on his trail, sought other fields. The other Plowden, who was licensed, grew quite bold. The physicians paid no special attention to him until he had a letter printed in a local newspaper severely criticising our hospital for not allowing him to have patients in it, and also complaining that the charges for X-rays were too high. As a member of the surgical staff, I replied, and this brought on a prolonged newspaper controversy.

I gave as our reason for not allowing chiropractors to practice in our hospital the fact that there is nothing in common between the

practice of medicine and chiropractic. That the two could not both be true, any more than could the two theories concerning the shape of the earth—one that it is flat and the other that it is round. I also stated that, before his complaint was made, we had decided not to make any more X-rays except for physicians.

I further asked what on earth a chiropractor wanted with X-rays anyway, since they claimed to be able, by simply running their hands over the backbone, to diagnose any trouble, from "9-day fits" to "7-year itch."

The chiropractor's tactics included evasion, and bombastic, unprovable claims, all the way through. He seemed to realize that he did not have any scientific facts to support his theories, so his replies consisted largely of testimonials from his dupes. In reply, I told of various cases treated by him that reported no relief. I also asked why, when he had kidney colic, himself, he had 'phoned for a physician, and, according to the physician, asked that a hypodermic be brought. He also admitted taking Epsom salts during this attack, but said it was because he did not have any one near to give him an adjustment! My most important and searching questions were entirely ignored.

Finally, I asked him 14 ques-

tions, numbering them. He made no attempt whatever to answer a single one, but contented himself with saying, "I am under no obligations to Dr. Epps to take up a lot of my time endeavoring to answer his many foolish and unprofitable questions." He had challenged me to enter a contest, he and I to treat an equal number of children for a year, and a report to be made on the number of days of sickness, and the physical condition of the children at the end of the year.

Although confining my practice entirely to surgery, I accepted his challenge, but, of course, he immediately backed down.

My 14 questions were:

1. "If his own child, or one under his care, was choking with diphtheria, would he refuse to have antitoxin used, or the windpipe opened so that it could breathe?"

2. "If a person was bitten by a dog known to be suffering from hydrophobia, would he have anti-rabic treatment given, or just spinal adjustment?"

3. "If a person had a well advanced case of acute appendicitis, would he advise operation, or a punch in the back?"

4. "In a case desperately ill with a pernicious form of malaria, would he use quinine, which every one knows is a cure, or just spinal manipulations?"

5. "Would he attempt to treat hemorrhage from a cut artery, or set a dislocated or fractured bone in the arm, or leg, by straightening out the backbone?"

6. "If a child had a tape worm, or round worms, would he use medicines, or spinal adjustments (on the person or the worms) to expel them?"

7. "How does he explain the well-known fact that no degeneration of the spinal nerves occurs in the usual diseases, such as pneumonia, influenza, scarlet fever, malaria, etc.? A pressure upon these nerves, where they emerge from the spinal canal, so great as to cause terrible diseases (often with

death) in other parts of the body, would surely cause easily visible trouble in the nerves where pressed upon."

8. "Why is it that this pressure does not cause a sharp pain at the one point in the back where the pressure occurs? If chiropractic theory is anything but a miserable fake, why isn't every disease accompanied by a sharp, stabbing pain at some particular point of the back?"

9. "How does it happen that the backbones of thousands of people slip out of position at the same time, at exactly the same point, in great epidemics of small-pox, influenza, yellow fever, infantile paralysis, etc.? And how does this also happen in hogs, cattle, chickens, etc., in epidemics of cholera, anthrax, etc.? How does the chiropractor explain the terrible mistake made by the Creator throughout the human, animal, fish and fowl kingdoms, in the structure of the backbone, to cause all diseases? Is there any real explanation except to give chiropractors a job?"

10. "How does a person with small-pox, or other disease, cause the backbone of another person to jump out of place at exactly the same point when they come near each other?"

11. "Has Dr. Plowden found the parents of a dozen children who are willing to have them treated for a year by chiropractic means alone, no matter what accidents or diseases befall them? Why did he suggest that we treat children only, in this test, if it is not because he considers children more gullible than adults? If he has found the children, I will at once endeavor to name the physician, other than myself, as he suggests, to begin the test. Of course, it is understood that the children under his care are to be treated by adjustments alone, no matter what happens. So now, let him 'put up or shut up.'"

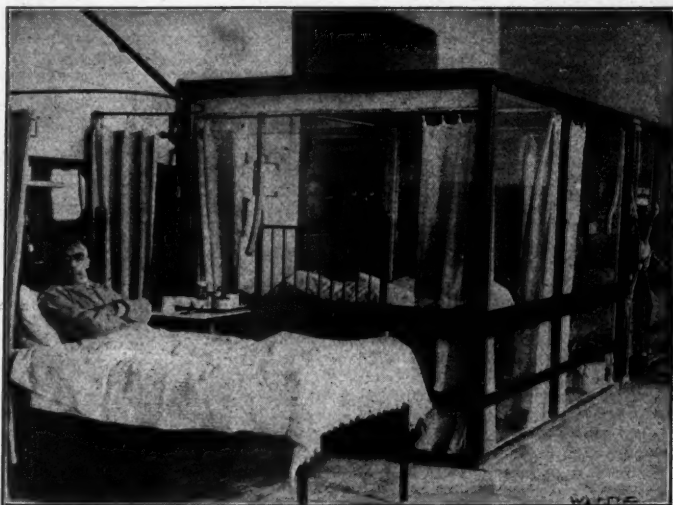
12. "Why does Dr. Plowden, and all other chiropractors, steadfastly refuse to try to show by

dissection the new set of nerves that A. B. Palmer claims to have found? Why did Dr. Plowden refuse my cordial invitation to go to Charleston recently and demonstrate these new nerves in the dissection room at the college? I am glad to hear that the arch-faker, Palmer, himself, is to soon be in Columbia, S. C. He is the very fellow that I would like to see try to demonstrate these nerves. I would like still better, however, to see the germ injection test tried out on him! This challenge is extended to him, also, therefore, Dr. Plowden, extended it to your great teacher with my compliments."

13. "How can the chiropractor work on the nerves of vision, hearing, and smell, through spinal ganglia that are not connected in any way with these nerves? How is it that cutting these sensory nerves results in total loss of the respective senses, while cutting the spinal ganglia has no such effect? Does he not know that spinal nerves and ganglia are a complete circuit, with the brain, the nerves having one division to carry out impulses and the other to bring impulses in?"

14. "Last, and most important, is Dr. Plowden ready to try the germ theory of the physician against the germ theory of the

Pure Out-of-Doors Air In-Doors



(Underwood & Underwood, N. Y.)

A sealed glass room has been installed at Guy's, London's most famous old hospital, for the treatment of patients who need oxygen. The room is kept continuously filled with air containing double the amount of oxygen present in normal atmosphere. Special arrangements also provide for the absolute purity of the air within the "show case."

chiropractor, by having me inject germs into him? If he is afraid to try it, it shows that he has no faith in chiropractic, and my case is won on this point alone, even if I had brought forward no other evidence."

"Remember, here are 14 questions; let us have no further evasion. If you cannot answer them, just write a letter admitting our claim that chiropractic is 90 per cent. pure bunk, and 11 per cent. nature-faking, giving an assay of a little over 100 per cent. pure piffle."

As Plowden failed to answer any of my questions, or to test the germ theory, I issued the same challenge directly to B. J. Palmer, head of the Palmer School of Chiropractic, Davenport, Iowa, while he was on one of his advertising tours, making adjustments at \$25 per. I challenged him to try the efficiency of germs when he visited Columbia, S. C. He claims that germs are mere scavengers and never the cause of disease. He wrote that he would allow me to inject germs into him if I would take such drugs as physicians claim are necessary to get sick people well, or to make them immune. I accepted his proposition at once, mailing him a special delivery letter. That has been a year and four months ago, and not a word have I heard from him since. He evidently wanted to continue his money-grabbing tour further than Columbia, S. C.

When you nail one of these chiropractic fakers down to cold facts, he always shows by his actions that he knows that his so-called profession is a humbug. And the public is not slow to appreciate this fact when it is demonstrated before its eyes. As long as the medical profession stands aloof from educating the public to the plain, simple, proven facts upon which the practice of medicine is based, just so long can we expect these foolish, but dangerous, cults to flourish. When will we physicians awaken to this fact?

Where did we physicians acquire our ability to recognize the absurdity of the claims made by these quacks? Through education. Then how can we expect the general public to recognize such fakes unless we see that the public is made acquainted with the simple, fundamental truths upon which medical practice is based?

This entire medical-chiropractic controversy has been printed in pamphlet form and mailed to a good many physicians. The many comments received have convinced me more thoroughly than ever that the best way to destroy the malign influence of these cults is to fearlessly turn the light of truth upon them. We have nothing to fear, nothing to lose, and all to gain by this method. By this means the influence of these already established can be largely destroyed, and it will be made much harder for other false teachings to spring up and gain headway. Some physicians express doubt as to the efficacy of teaching the public medical facts. These physicians evidently lack faith in the power of truth. Telling the truth about anything that is true cannot harm it, and the best way to destroy the false is to show that it is untrue.

Of far greater importance than the destruction of any one of these cults is the convincing of the public that we physicians are always working in the interest of the public welfare, and that whenever anything beneficial in preventing or treating disease is discovered, and proven, we will immediately, and gladly, adopt it. When this fact is firmly established, through free discussions, then the layman will at once look askance at any mode of treatment that is denounced by our profession.

Learn to laugh. It is better than medicine for the body. It gives the weary mind a holiday, freshens the spirit and tips the peaks of life with light.

The Fable of the Discouraged Patient

E. N. Reed, M.D.

Los Angeles, Cal.

THERE was once a young Bank Teller who spent Less Money than he Earned. He had a Wife and Two Children and he was Ambitious, Courageous, Thrifty and Industrious. He was Paying for his Little Home in Monthly Installments and was Determined to give his Children a Good Education and to have a Modest Independence in his Old Age. In short, he had the Qualities from which are made the Best Citizens.

One of his Articles of Faith was that "The Best is the Cheapest in the End." So, when he acquired a Dyspepsia, through working a Bit too Much and Playing too little, coupled with Careless Habits of Eating and a Temporary Business Worry, he went to the best Doctor in his Town.

The Doctor took a very complete History and made a thorough Physical Examination. He then said, "We shall Have some X-ray Studies and a Complete Urinalysis and Blood Examination; come back in Three Days, when I have these Findings."

At the End of the Three Days the Young Man got a half day's Leave of Absence from the Bank and reported to the Physician, who said to him, "So Far, the Examinations have been practically Negative. We shall have your Stool Examined and give you a Functional Kidney Test."

The Young Man became Alarmed, since he feared that he was running up a Big Bill, but he Talked it over with his Wife, and they decided that there Might be something Seriously Wrong, although his Trouble had seemed a slight one, and that, Having Gone so Far, they had better Finish the Thing.

After Completing these tests, the

Doctor said, "I am Not yet entirely Satisfied. I have the Reputation of Going to the Bottom of Things, which Reputation I wish to Sustain. I would therefore like to have you Go to the Hospital for a Week's Observation."

The Young Man took this News to his Wife with much Trepidation. They were both Anxious, and a Dark Cloud settled over the Little Home. But they Felt that now they must Finish it, and the Young Man decided that he would use his Vacation Week, in which he had Planned to take the Family on a Camping Trip in the Ford, for the Hospital Observation.

At the End of the Week, the Doctor said, "My boy, I am Happy to Tell You that your Trouble is only Functional. Eat a Little more Slowly, cut out some of the Starches and Sweets, and have a Bit more Play and Out-of-Door Exercise, and for the Rest, *forget it*, and you'll be All Right."

When the Young Man took the Bills Home to the Family Auditor and Treasurer, his Wife, and they Added them up—\$124.50—They decided that they must Not forget it, for that Year at least.

"We must Wait until Next Year to get our Radio," they decided; "and we'll leave off Mary's Music Lessons for a couple of Months; and Mother will have to Wear the Old Winter Coat for one more Winter, because Dad's position Requires that he have a New Suit this Fall, as Usual."

So the Young Man went back to Work without his Vacation in the Mountains and with a Little More Worry than Before.

MORAL: PHYSICIANS SHOULD ALWAYS TRY TO SEE THINGS FROM THEIR PATIENTS' VIEW-POINT.

A Convenient Accounting System

Arthur C. Jacobson, M.D.

Brooklyn, N. Y.

I HAVE used the accounting system described in this article for ten years, and it has met all requirements satisfactorily.

Prescription blanks, detachable from the stubs, as shown in the illustration, are made up at a cost of five dollars per thousand by W. Haedrich and Sons, 325 Gold street, Brooklyn, N. Y. The paper used is a "white 20-lb. sulphite bond," suitable for fountain pen use. The stubs have three perforations at the top, as shown in the illustration, so that about fifty of the prescription blanks may be carried in a loose-leaf cover $7\frac{1}{2}$ by 4 inches (No. 1105 loose-leaf cover, Irving-Pitt Mfg. Co., Kansas City, Mo.). Such a cover costs about two dollars.

It will be noted that in addition to the items printed upon the stub there is a space for a copy of a prescription, if one is written, or for memoranda regarding dressings, operations, obstetric work, payment of an account, etc.

When one comes to the end of a month and all prescription blanks have been detached from their stubs (whether used or not), the total cash taken in, as shown by the stubs, is counted and noted on an envelope. Each stub carrying a charge item is then filed as a ledger card in a suitable box ($15\frac{1}{2}$ by $5\frac{1}{4}$ by $3\frac{1}{2}$ is a convenient size, containing drawer which slides in and out), the names being indexed alphabetically, with colored master cards giving full names, addresses and general data of interest.

The stubs recording cash payments other than in full or partial settlement of accounts are filed away in the aforesaid envelope, upon which is marked the month

and year, in addition to the total amount of cash, as mentioned before.

Stubs showing full or partial settlement of accounts are, of course, filed in the ledger-box.

Bills are made out monthly from the ledger-box accounts.

As the accounts are settled the dead stubs are removed from the ledger-box from time to time and either destroyed or filed away, so that the ledger is always "dynamic."

Of course, if a man does not write many prescriptions, a good many blanks will be torn up unused. But this defect (?) of the system is more than made up for by the great convenience and simplicity of this unified cash-credit-ledger scheme. I always tear off the prescription blank at the time I fill out the stub, whether written upon or not; either handing it to the patient, if I have prescribed, or throwing it into the waste basket if not.

On the back of some stub showing an ordinary cash payment and therefore not destined for the ledger, in a "book" in current use, I note the day's outside calls and memoranda. A stub is filled out for each visit.

Where more than one prescription is written for a given patient, on two or more blanks, of course, only the first stub would carry the cash or credit items, the others being used merely to record copies of the prescriptions written.

If a patient pays a bill in full or on account and a stub is used to record such an item, and you render him some service at the same time or on the same day, use another stub to record the latter item, whether paid for or charged.

1234

Date..... Mem. of Fam.....

Name.....

Address.....

Diag.....

Paid..... Charged.....

$2\frac{3}{4}$
 $3\frac{3}{4}$

Telephone MAIn 1991 Federal Reg. No 784

ARTHUR C. JACOBSON, M. D.

Office Hours: 115 Johnson St., near Bridge St.
2-3
7-8 Brooklyn, N. Y.

And by Appointment

R For.....

Address.....

Age..... Date.....

$2\frac{3}{8}$
 $3\frac{3}{4}$

Should Physicians Patent Their Professional Inventions?

Frederick S. Stitt, Esq.

Washington, D. C.

This muted question is clearly and learnedly discussed by a well-known member of the Patent Bar of the District of Columbia.

ARTICLE I, Section 8, of the Constitution of the United States, provides that Congress "shall have power to promote the progress of science and useful arts by securing for limited times to authors and inventors the exclusive right to their respective writings and discoveries."

Upon this provision of the basic law of our land, the patent statutes were formulated, and by reason of the encouragement thus given to inventors, due also in part to the liberal manner in which the patent laws have been interpreted and enforced, this country has progressed in the industrial arts by leaps and bounds. Without such encouragement we would not stand, as we do today, head and shoulders above the other nations of the world, blazing trail after trail through the wilderness of ignorance and helplessness into the open fields of mechanical and chemical knowledge where wealth and creature comforts abound.

A patent for a new and useful invention should not be regarded as a monopoly created by executive authority at the expense and to the prejudice of the community, but as a public franchise granted in recognition of benefits conferred by the inventor upon the public and as just compensation for the beneficial inventive act. The right of property which an inventor has in his invention is excelled in point of dignity by no other property right and is equalled in point of dignity only

by the rights which authors have in their copyrighted books.

Physicians heretofore have uniformly not taken advantage of their rights in this regard and many of them have held to the opinion that to seek and secure a patent on an invention relating to their profession, whether it be a process or a mechanical device, is not in keeping with the spirit of abnegation and disinterested service to humanity for which the medical profession, above all others, is unquestionably and justly noted.

But should they hold to this view?

In my judgment, they should not.

A physician is continually called upon to give his services free to those who cannot afford to pay and does so ungrudgingly. There is no reason, however, why he should not receive some profit from any invention he may conceive and develop, especially if it be true (and it is true) that by patenting the invention he can control the manufacture, sale and use of that invention, and by a judicious use of such control can benefit the public much more than he could if the invention were not patented, but merely thrown on the market and thus made free to be manufactured by anyone.

For example, if a physician invents a new and very efficient surgical instrument and permits it to become known without patenting it, then in that event anyone can

manufacture the instrument, not only those exceptionally skilled in the manufacture of surgical instruments and having exceptional facilities for making them of the highest quality and workmanship, but other manufacturers not so fortunately situated and perhaps not so careful in their manufacture.

Under such conditions not only does the physician-inventor fail to receive the just compensation that should be his, but there is placed on the market a large number of instruments of inferior workmanship or design which might defeat the very purpose for which the instrument itself was designed. On the other hand, if the inventor secures a patent he can say who shall and who shall not manufacture the instruments and place them on the market, and can see to it, by the exclusive control of the invention his patent gives him, that nothing but the best workmanship enters into the manufacture, and at the same time should and does receive a royalty for the manufacture and sale.

Moreover, using the same example, it is manifest that if the instrument in question is not patented, the manufacturer or manufacturers making it can put upon it any price they may see fit to impose, without any regard to, or consideration for, the ultimate purchasers or users, and thus incur a hardship on the public, whereas if the instrument is patented, the patentee can dictate the price at which the instruments shall be sold and by keeping the price down to a point where the manufacturer will make only a legitimate profit, can greatly benefit the public.

A somewhat different case is one where the physician may conceive a broadly new idea of great value to the public when fully developed, but not having the means or facilities to develop the idea to a marketable formation, he appeals to an established manufacturer to reduce the invention to commercial shape. If, under those circum-

stances, the inventor does not patent the broad idea and the manufacturer who has developed the invention to marketable form applies for and secures a patent on the idea in its perfected condition, the manufacturer alone will, in that event, have full control of the device patented, and the original inventor responsible for the idea having been brought into being, will have nothing to show and will not only not participate in any profits which may be derived from the commercial exploitation of the device, but will have no control or say in regard to the manner in which it is exploited.

Again, there is no incentive for a physician to invent and make known to the world a new and useful instrument or process unless he can feel that he is justly entitled to some pecuniary reward, in addition to the approbation of mankind, and there is no doubt that the opinion shared in by members of medical societies and a large number of physicians everywhere, that it is unethical for a physician to secure a patent on his professional inventions has retarded progress in methods and means useful to the physician in his practice which has resulted in a distinct loss to suffering humanity.

Should not this ban be lifted from the medical practitioner?

It seems to me that it should, and that the whole matter should be left entirely to the discretion of each individual physician. By patenting his inventions he can control them and can definitely decide what shall be done with them, who shall manufacture and place on the market under his patent or patents, and who shall use his patents, as well as the price at which the device shall be sold, whereas if his inventions are not patented he has no control whatever over them.

Thus it will, in my judgment, be a distinct benefit to the public for inventions of this character to be patented, to say nothing of the

compensation which is justly due the physician-inventor for the benefit he confers by his invention, and it should be left to his own good judgment as to how much he shall ask for the invention as a royalty or otherwise when it is patented.

Furthermore, it is well known that it is extremely difficult, if not practically impossible, for an inventor to induce a manufacturer to make or commercially exploit his invention unless it is patented and the manufacturer can thus se-

cure profit from it that he could not otherwise obtain, and doubtless there would be on the market today a large number of useful medical inventions, now unknown to all save the inventors themselves, which would be of inestimable value to the public, were it not for the impression that seems to be instilled in physicians' minds, that by patenting an invention they are committing a selfish act and violating the long-established code of ethics of their profession.

Are You Buying Christmas Seals?



The father of these children died from tuberculosis and the mother is under treatment. Consequently they are receiving preventive treatment at a tuberculosis health centre. The money received from the sale of Christmas seals is spent in carrying on work of this nature.

(Underwood & Underwood, N. Y.)

Health Publicity That Pulled

Walter M. Brunet, M.D.

New York, N. Y.

Results count. The author has been through a most resultful campaign. Why not use his plan for periodic health examinations?

A FEW years ago, in February, 1920, in the columns of *The Saturday Evening Post*, *The Christian Herald* and other publications, the Americal Social Hygiene Association, offering a much-needed co-operation to its governmental allies, began a national publicity campaign in the interest of social hygiene generally and against the venereal diseases.

These initial advertisements, contributed by public-spirited American men and women, served a three-fold purpose:

They gave American citizens an opportunity to express the fact that they want to see real, concerted action in eliminating the venereal health menace and are anxious for the facts, true and unbiased, regarding the infections.

They began the education and moulding of public opinion on a large scale by reaching millions of readers monthly.

They popularized the simple facts of social hygiene as it makes for happier home life, more successful marriages and the rearing of healthier children.

The results of the advertising campaign, which lasted six months, have been remarkable, and more than warrant an extensive continuation of publicity to the general public in other avenues of medical endeavor.

WHAT HAPPENED.

Thousands of men and women from every state in the Union—many even from Hawaii, the Philippines, India, China, Japan, Continental Europe, Africa and South America—wrote to the As-

sociation endorsing the work—urging its continuation—asking for help, advice and literature—voicing a strong approval of its sane, progressive social hygiene program.

The State Boards of Health throughout the country heartily endorsed the campaign and its methods as valuable to their state work.

Mothers sought advice and the booklet, "Child Questions and Their Answers."

Fathers everywhere requested the booklet, "The Boy Problem."

Through direct requests and State Board of Health co-operation two hundred thousand copies of Will Irwin's book, "Conquering an Old Enemy," were distributed.

"Why Let It Burn?"—a strong indictment of the Red Light and commercialized prostitution—went to those interested in clean communities and in putting out of business the male and female parasites who take the main profit out of commercialized prostitution.

"Health for Men" began its mission of acquainting the men of America with definite medical facts about the venereal diseases.

Hundreds of industrial plants, employing in the aggregate many thousands of men, not hitherto reached by the Association, became interested in plant education and health work. Their efforts will accomplish much good.

Scientists, doctors, educators, noted men and women generally, were enthusiastic from the start.

From every quarter and from every individual the consensus of

(Concluded on page 47.)

Reciprocal Work Compared With Group Practice

F. W. Bush, M.D.

Van Horne, Iowa



MEDICAL economics should be taught in medical schools, but is not, as far as I am aware.*

Medical economics should be discussed in medical journals but, outside of an occasional article, the subject is passed up by the average medical editor.

For that reason the profession welcomes a journal devoted exclusively to the subject and it should be utilized as a public forum to discuss its problems. All practitioners will be helped, more especially young physicians who often flounder before getting started on a good financial and businesslike foundation.

Harmony and good-will among doctors is essential to their welfare. There is often a "lemon" in a locality who keeps up a disturbance and makes himself objectionable, preventing others from working pleasantly. If possible the lemon should be sweetened and kept as friendly as he will allow. However, as one prominent doctor suggested, there are some men on whom it would be a waste of sugar and the only way is to use alkalies and neutralize the acid.

In this locality we have worked out a plan which by its nature securely holds friendship. Friendly feeling encourages business in a co-operative way and leads to conferences and consultations

where previously a distant doctor was usually called.

This plan is based on reciprocity. If my neighbor to the west calls me to give an anesthetic, I get no cash, but he agrees to give one in turn for me. My neighbor to the south has given much attention to tuberculosis and diseases of the chest and we respect his knowledge when a consultation on the subject is needed.

Another neighbor does good surgery, and we materially appreciate the fact.

Two of our men have taken an interest in the newer features of local anesthesia, sacral block, etc., and we call on them when needed.

In short, we employ the knowledge each man obtains on visits to the different clinics to the advantage of all.

Each physician collects on the business that comes up in his own practice, the others helping and keeping books on cases, so that a balance can be drawn at the close of the year if too far one-sided. Thus the one calling is careful that the account is good or he makes the financial condition of the patient known, as he must return charity favors.

This plan has been found to work out very nicely with us and

* A course on Medical Economics is given at the College of Medicine, Long Island College Hospital, Brooklyn, during the second semester.

Some form or other of co-operation is likely to prove the most satisfactory method of solving the rural practice problem.

While Dr. Bush's idea is now roughly carried out between neighboring physicians in various sections, it has remained for this group of Iowa practitioners to perfect a scheme which is meeting with success. We hope other men will try the same plan and report results.

it holds business because one must reciprocate to keep his own business going well. There is much practice in nearly every locality left undone because it takes more than one man to do it. In small places where doctors are likely to be critical of each other's efforts, they hesitate to do anything that might offer opportunity for criticism.

In a nearby city we have the association of an internist to whom we refer the cases needing extensive laboratory work in diagnosis which we cannot carry out here. He has agreed with us that under no circumstances will he take charge of a patient from our locality without our knowledge and consent.

A widely known X-ray man treats us equally well. He always protects our interests and helps

us in difficult fractures.

In surgery we work with the surgeon, carrying our share of the responsibility in the diagnosis and work. Thus it can readily be seen that we find pleasure and contentment in practice and we believe others could follow this plan to advantage.

If not too far from me, I would be willing to help a very few doctors organize a reciprocal plan, spending what would be my vacation time this way. After this plan had been thoroughly tried by others we could report to MEDICAL ECONOMICS just how successful it had been.

To the physician who wishes to increase business, to have some genuine friends, to enjoy his daily work, to take vacations with his practice cared for, I would say: "Try this plan."

Raising the Necessary in London



St. Bartholomew's Hospital, London, enjoyed a decided boost in funds on the last day of its recent drive through the novel efforts of several ladies who auctioned off their garters. The amount of money received indicated that purchasers paid no attention to the intrinsic value of the article sold.



(Underwood & Underwood, N. Y.)

Personal Medicine vs. Mass Health Protection

THE indications are that some sincere and hard-working folk who are struggling to raise the health index of these our United States are making one serious mistake in the campaign for health examinations. They are overlooking the big factor—personal medicine.

Health examinations, to be successful, call for three fundamental things. A systematic and thorough physical examination. A close personal understanding between physician and client. A continued supervision with re-examination from time to time to assure proper guidance to the end that healthful habits may ensue.

Wholesale examinations by clinics, commercially conducted institutions, and the like will not render an adequate health service to the public. Where individuals must co-operate, mass health protection cannot be provided. On the other hand, individual medical service on a personal basis can promote longevity.

Doctors will be asked to examine groups in industry, in mercantile establishments, in churches or elsewhere as a contribution to the cause of better community health. All this would be excellent if it would produce better health—but will it?

Dr. Haven Emerson has said in the *Journal A. M. A.*, May 12, 1923:

"During the years prior to entry into school life, and for many

of the children during their school years, some form of medical supervision during apparent health has seemed justified by the number of important defects discovered which need correction, and by the improvement in growth and functions of body and mind when such handicaps are removed.

"The annual physical examination of commissioned officers of the army is a type of medical service for health protection which is now increasingly called for by individuals and groups of adults, whether at their own initiative and expense or as a part of employment or insurance contracts as a sound financial investment.

"The periodic medical examination of apparently healthy persons is designed to detect the early evidences of disorder before discomfort, inconvenience, interference with work, or anxiety has driven them to seek medical advice for the treatment of established disease.

"In the past, when a person has consulted a physician he usually has had symptoms of disease of which he has been aware, and concerning the importance of which he seeks opinion and relief through treatment, or he fears he has a disease, although not suffering from anything more tangible than apprehension of disability, or he has sought protection against some preventable infection, such as small-pox, typhoid and diphth-

Preclinical Medicine pre-supposes a close personal relationship between doctor and client. School inspection, life insurance, longevity and similar services, industrial medicine and all health promotion work predicated on physical examination remain only partially successful, if successful at all, unless the patient establishes a permanent and personal contact with a conscientious physician. Here lies the medical profession's contribution to health work—MEDICAL ECONOMICS urges recognition of this fundamental fact and welcomes suggestions and experiences that will explain and illustrate methods of preparation for profitable fulfillment.

eria. Nowadays we find people coming to physicians in increasing numbers to have an estimate of their state of health, and guidance in the means of maintaining or improving it, or for specific advice to avoid the disabilities of advancing years.

"For whichever reason the physician is consulted, he must obtain such pertinent facts of the patient's personal and family experience as may bear on the specific diseased condition now existing, or which seem to require modification of his manner of life in the interest of his health. * * *

"In a procedure such as that required to obtain an accurate and comprehensive understanding of the condition of an apparently healthy person, the slavish or routine following of a standard procedure must lead to poor results. * * *

"Hygienic advice alone, in the presence of the many well-marked disease conditions which are commonly discovered in any group of people who believe themselves wholly sound and healthy, will, of course, be of no avail without the application of appropriate medical and surgical treatment for relief and cure.

"Of the many disorders found among people apparently in good health, there are five so common that advice is frequently called for to correct them. These are sleepishness, constipation, overweight, underweight and arterial hypertension. The physician should be prepared to give specific instruction as to hygiene, manner of life, diet, etc., according to his own opinion in helping patients, who think themselves quite well, to correct or counteract the harmful effects of these common errors which are likely to cause serious disturbance of health with advancing years."

This can mean but one thing—true personal medicine with the highest possible development of individual understanding between doctor and patient.

The ex-president of the A. M. A. during the past year toured the United States, eloquently pleading for more and better personal medicine. At the Chicago meeting of the A. M. A. in his address to the House of delegates, Dr. Wilbur said:

"The development of preventive medicine and of public health since the inauguration of the public health of today based on bacteriology has been of such a character that many have thought that the whole control of health should go over to the state. Now, it seems to me there is a dividing line which can be made and that we ought to have a definite series of studies along that line. The state is interested in the protection of individuals from contagious diseases. It has a right and it is willing to spend sums of money for that purpose. It seems to me that the state is not responsible for people who have resources of their own for their medical or surgical care.

"There are necessarily certain services that must be rendered to the indigent, to the insane and to the prisoner. It seems to me, too, that we must keep individualism in medicine if it is to advance, and we must keep individual relations between patients and physicians if medicine as an art is to go forward. The minute we allow a bureaucracy to step in between the physician and the patient, it seems to me we have taken the one step that will degrade our profession and that will put us so that we cannot render ideal professional services to patients."

This must be understood to apply to the health examination as advocated by the A. M. A. and many State and County Medical Societies. There is a field for medical examinations in commercial and industrial life, the inspection of school children, the detection of communicable disease, as well as in insurance and similar work where individualism may count for but little. The health

(Concluded on page 48)

What Makes the Doctor Poor?

L. E. Daugherty, M.D.

Cumberland, Md.

Medicine should be practised by physicians, not by laymen who have learned by rote how to do something that belongs in the medical field.

THE leak in business is what eliminates the profit and no business can be run without profit.

Altruism is an essential, and he who is not altruistic to some extent cannot succeed in medicine. But were it all altruism and the medical man's income depended on what was voluntarily given him, I'm afraid most of us would be choosing some more lucrative occupation.

The medical profession is suffering from some very serious leaks, and it is my purpose to direct attention to a few. The old adage, "United we stand, divided we fall," was never truer. We are surrounded on every side and inroads are being made by all sorts of quacks and charlatans and as a result we are stabbing our friends, as well as our enemies, in the dark.

What is the cause of all this?

The enemy seeks the weakest point of attack and leaks always present the point of lowest resistance.

Getting a patient is the easiest part in one's practice. To keep him and have him send his friends to us is the hardest. That difficulty is the first leak with which we have to deal.

Are we always as careful as we should be in keeping a patient and do we always strive as hard as we do to get new ones? Do we not think we have them cinched, and before we hardly get them on the line, so to speak, throw out the hook for another?

Let us consider the factors that

go to make up this leak. The patient, for example, complains of headache. Headache is a common thing, so common, in fact, that it seems trivial. If we don't watch out we'll lose the patient very soon by treating the condition too lightly. On the other hand, if we take it seriously we will seek the truth.

Employing every method of modern diagnosis we will differentiate whether it is from one of the vital organs, or one of a symptom complex. If the headache is from a bowel disorder and is not cleared up by the usual remedies, we suggest an x-ray examination, or perchance we refer him to a gastroenterologist and we are mighty careful to select a good one.

If the trouble comes apparently from a circulatory disturbance we are not long in advising him to consult an internist and perhaps we may go with him to assist in the consultation, because the patient, and sometimes the physician and the specialist, profit by the examination and treatment that follows.

But now comes the leak. It has been neither an intestinal disorder, nor does it come from the other causes. He has just a common, very common headache from eye strain. Isn't that simple—so simple in fact, that we tell him to have his eyes examined and get glasses.

All the patient has to do is to get glasses, and since we only do a general practice and glasses have nothing in common with our every

day work, we simply say, "just get glasses," and the patient nine times out of ten is disappointed in us because he thinks he needs medicine and he is likely to go away with a bitter taste in his mouth.

This point in the relationship between the patient and the doctor can either be one that decides whether he will choose the doctor as his future counsellor or become a worker and booster for the quack and charlatan, eager and waiting to prey upon the medical profession.

Of all the advice given to a patient, none possesses so indefinite a purpose as that to obtain glasses. For ages this procedure by the

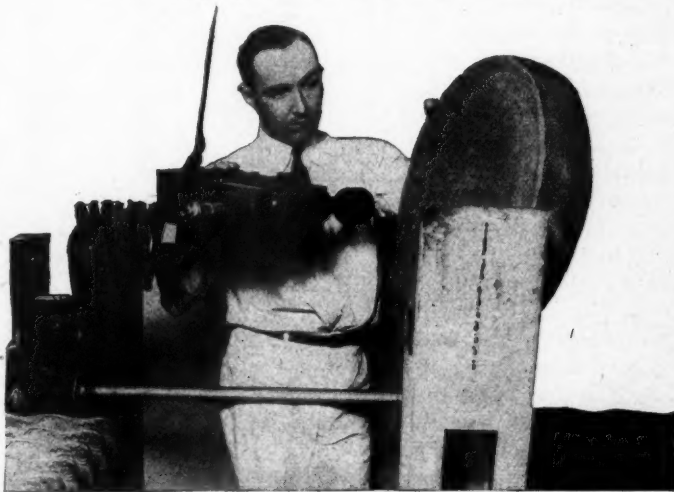
public has meant to find a pair of glasses to make one see better.

In this case it is not the question of sight. Glasses are to aid in relieving headache. The patient is either going to be your patient for life or else he is going to forget your part in connecting up his headache. Altogether too often we do not stop to consider that glasses serve to fill a physical defect that varies as does the general health of the patient and that is not a mechanical correction to be measured as you would so many yards of goods—as we are led to believe by the optician or optometrist.

Refracting, or the art of fitting

(Concluded on page 46)

X-Ray for Cheese or Chest



Heretofore the popular impression has been that the X-ray is intended for medical and surgical purposes only. A recent development makes it assist in commercial life, even to the extent of ascertaining if smuggled articles are in possession of incoming travelers.

Here the X-ray is shown examining the vitals of a lowly cheese, to learn of its quality.

(K. & H. Photo.)

The Gigantic Dimensions

WHEN the average reader of *MEDICAL ECONOMICS* goes over the pages of his favorite journal, he does not realize—on account of its tabloid form—the tremendous proportions the journal has assumed.

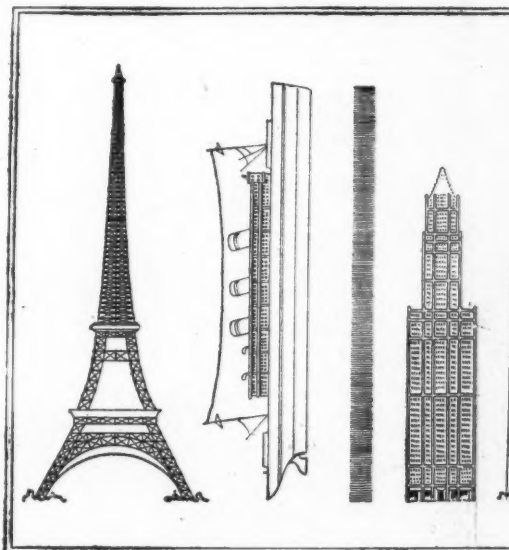
Although only a little over a year old, *MEDICAL ECONOMICS*, small in individual size, is really gigantic in actual stature.

Two of the best known examples for height are the Washington Monument in Washington and the Woolworth Building in New York. One issue of *MEDICAL ECONOMICS*, if piled up, would reach 943 feet into the air, or almost 400 feet above the top of the Monument.

The Woolworth Building is 750 feet high. If one issue of *MEDICAL ECONOMICS* were placed upright beside this building it would go into the air 943 feet, or almost 200 feet higher than the beautiful tip of the Woolworth's Gothic tower.

The hat on the head of William Penn, surmounting the tower of the City Hall in Philadelphia, is 535 feet from the ground. The tip top of the Great Pyramid is 451 feet from the ground.

The topmost number of a single issue of *MEDICAL ECONOMICS*, if piled, would be almost as far from the earth as the top of the highest structure in the world—the Eiffel

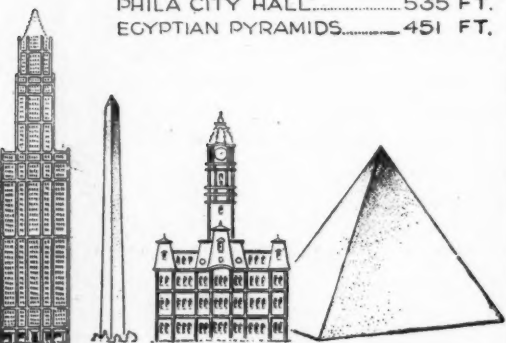


Dimensions of a Year-Old Infant

Tower in Paris—which pierces the ether to the extent of 984 feet.

The Leviathan, the largest ship in the world, is 950 feet long, or only seven feet longer than a vertical issue of this publication.

EIFFEL TOWER.....	984 FT
LEVIATHAN.....	950 FT
MEDICAL ECONOMICS	943 FT.
WOOLWORTH BUILDING.....	750 FT.
WASHINGTON MONUMENT.....	550 FT.
PHILA CITY HALL.....	535 FT.
EGYPTIAN PYRAMIDS.....	451 FT.



A graphic idea of the magnitude of one issue of **MEDICAL ECONOMICS** is revealed by these figures.

Six tons of paper are used in each number of a little over 100,000 copies.

If the present issue were placed end to end it would extend a little over twelve miles. When one considers that the Brooklyn Bridge is $1\frac{1}{4}$ miles long, one gets another idea of the dimensions of this journalistic infant.

Placed side by side, the advertising of one full page in one issue would extend eight miles, which is the exact length of the Cape Cod Canal.

Great as is the size of a single issue of **MEDICAL ECONOMICS**, we are proud of the fact that it is greater in the estimation of its readers, if we can judge by the encomiums showered upon us by thousands of physician readers.

Our aim is to serve the medical profession sincerely, unselfishly and impartially, and to the doctor's best interests we pledge our entire effort.

Our Attitude Toward the Cults

How shall the medical profession regard the cults?

Dr. David Riesman of Philadelphia in his presidential address before the American Gastro-enterological Association tells that we should apprise the laity of the danger in employing men possessing a pet method with very limited range; that we should learn what merit there be—if any—in these cults, and separate the wheat from the chaff, and further that we should make an effort to educate the cults to a higher level.

Dr. Epps of Sumter, S. C., adopted a method recently which seems to have been very efficacious so far as exposing the fallacies of chiropractic is concerned. On another page he sets forth the difference between medical science and chiropractic. He demonstrates very forcibly what many other physicians have believed, that when these people are driven to cover, they do not attempt to back up their alleged "scientific" facts. Dr. Epps points out that turning on actinic rays in the form of clear and pitiless publicity is the best cure.

We commend the doctor's article to the careful consideration of all men who are giving this subject any thought. It may point the way to a solution of a somewhat vexatious problem.

A Good Example of Civic Courtesy



The use of two of these signs at distances of several hundred feet each side of a house in which there is serious illness, is the courtesy extended its citizens by the Borough of Rutherford, N. J. Some of our readers may care to suggest a similar courtesy in their own communities.

Getting Medical Truth Across

Oscar E. Blank, M.D.

Perryton, Texas



IF MEDICAL ECONOMICS were never to institute another new idea other than its advocacy of bringing the idea of periodic health examinations to the public by means of advertising, its existence would be justified.

Your readers in the large centers cannot realize the fight the country doctor has to make to put anything like advances in medicine across. I have been practicing seven years in the newly settled country in Western Oklahoma and Panhandle of Texas. A trip of 20 miles to make a call is often our average and sometimes we go much further to see our patients.

I realize better than many country physicians in the more thickly settled parts, that if we are to carry out our highest ideals, we must teach our patients along preventive lines. It is essential for their welfare, and our ability to serve them.

It seems to be out of the question to get my patients to even consider periodic health examinations on my say so. I talk to them very earnestly about it and the remarks seem to go in one ear and out of the other.

People do not seem to understand why they should be given typhoid vaccine, toxin antitoxin and other essential vaccines, serums, etc. I have tried to talk to people individually as well as collectively, but have not gotten very far, so far as results are concerned. To prove this I might say that while my average practice is

\$5,000 a year, I have only vaccinated three persons against small-pox and have gone through one epidemic.

One of the difficulties with which doctors in this part of the country are compelled to contend is the chiropractor. Birds of this kind are quite plentiful in Oklahoma and they preach against vaccines as not only being useless, but as doing more harm than good. These people were able to get an article in one of the fiction magazines awhile ago and they have been utilizing that to advantage to themselves.

The reason is that the great bulk of the unthinking public believe matters seen in the public prints, especially in magazines and newspapers. The

Men who practise in the cities seem to be agreed that periodic health examinations are essential both for patient and physician. Here is an argument for the country practitioner by one. Dr. Blank needs the country society's help. Are there not thousands of doctors in this country in a position similar to Dr. Blank?

health authorities in the cities are able to aid their own campaign by publishing the gospel of good health and the means of prevention of disease in the newspapers, but out in the rural districts any education of this nature must be carried on by the physician. Of course, he could prepare a series of articles and have them published in the country papers that circulate in the territory, but that would be contrary to medical ethics. You have solved the problem by advising that the county and state medical societies do this very kind of work.

If every county society would prepare the right kind of material for the newspapers we could not

(Concluded on page 46)

Know Your Clientele

J. N. Tracy, M.D.

Memphis, Tenn.

In this brief article Dr. Tracy analyzes for us a qualification—natural to some physicians, acquired by others—which often spells the difference between success and failure.

“**S**TUDYING people spells success.” The young physician and indeed the older one who has not attained a living practice may add to the number of his patients by studying the people he meets. The habit of “mixing,” as performed by the predatory doctor, is entirely different from learning the names, business and families of those to whom the physician is introduced or meets in his daily intercourse. “Back-slapping and jollyng” is not the sort of respect and courtesy which inspire confidence and esteem, but calling others by their correct names and knowing their marital and other connections, their temperament and achievements are not only becoming to the medical man but add families to his following.

I have tried this and I see results. The physician may begin with the people next door. Cards, directories and an occasional inquiry will afford information that will lead to an introduction or prepare for the casual meeting. If a doctor calls his neighbor by name, he will soon form an acquaintance; and if he forbears to exploit himself, listens, instead of displaying his own importance, he may gain the family influence. The cost is little and the reward is large.

I have heard young doctors and older men who have little practice deplore their poor memory for names and faces. I tell them to give their minds a chance. The process is simple—attention, in-

terest, repetition, association and recall. Asking acquaintances and friends the names and general facts about those you wish to meet is very easy. If you will only listen they will relate the family history. Any time a conversation dies, you can resuscitate the corpse by asking about Brown or Jones and keep it alive by saying a word occasionally to show you are interested.

Although knowledge of medicine is essential, one's practice is not in proportion to his efficiency in the sick room, but to his personality. Building a practice requires the development of moral and esthetic sensibilities, which in turn strengthens the bonds of sympathy between the medical man and his clientele. The doctor who exhibits himself instead of matters of importance, who regards himself instead of others, who scorns to know even his neighbor's name, lacks both personality and practice.

Meeting people successfully does not consist in brilliance of intellect, unusual aptness of repartee, slap-stick comedy, cheap familiarity or hypocritical dandling of children. To the contrary the greatest merit any man can possess, the brightest charm any doctor can have is sincerity. The advantage gained by feigned interest in others is feeble and short-lived. But good will toward men and sincere desire for their happiness and health will not only make the physician worthy of practice, but these virtues tend strongly toward winning prosperity.



*A Nestlé's Milk
Food Baby*

**A Full Size Package
of
Nestlé's Milk Food**

**Will Be Mailed to
Any Physician Using
This Coupon**

Nestlé's Food Co.,
Nestlé Bldg., New York.

Gentlemen:

You may send me, without charge, a full size package
of Nestlé's Milk Food for a thorough clinical trial.

Name

Address

Druggist

Is "Doctor" a Misnomer?

Henry L. Burton

New Orleans, La.

Some people feel that the title "Doctor" is being cheapened by its use on the part of a vast number of non-medical persons. A question in the minds of many is "Should physicians alone be called 'Doctor'?"

A WOMAN was suddenly taken ill at a northern summer resort somewhat removed from any large village. Recalling that a man in a nearby camp always referred to himself very meticulously as "doctor," the husband of this woman rowed across the lake and awakened the "doctor," requesting him to visit his sick wife. The supposed medical man rather shamefacedly announced that he was not a physician but a doctor of philosophy, engaged in teaching.

As a result of the time lost in going for this man, the woman was subjected to a tremendous amount of suffering, and had it not been that by rare chance an eminent New York medical man was located a few miles in another direction about daybreak, the woman might have died.

All this leads me to a desire to expostulate against the American habit of the assumption of the title of "Doctor" by people who are not physicians.

I recognize perfectly well that colleges have the legal right to grant various degrees, both earned and honorary, which carry the title, but it is incomprehensible to very many people why the recipients of these degrees insist upon the use of a title which, in this country, is to a large extent a misnomer.

In France at the present time the authorities are taking action against the promiscuous use of the title "Doctor." Very recently

a law was placed upon the French statute books creating the Doctor of Veterinary Medicine, a degree which is also conferred in America. The French law provides a severe penalty for its use without authority and for the use of the first word of the degree only. In other words, the veterinarian must style himself "Doctor of Veterinary Medicine." If he calls himself merely "Doctor" he is subject to a fine of 10,000 francs. Some of France's most able legal minds are insisting that no other doctor except a doctor of medicine be permitted to use the title "Doctor" except with a qualifying phrase.

The doctor of philosophy, or of divinity, or of law, must always specify his degree or else these eminent jurists believe he should suffer the penalty. In their opinion, the only doctors in France who are referred to simply as "Doctor," should be regularly graduated and legally qualified doctors of medicine.

The carrying out of such a law in this country would be almost a practical impossibility. Yet the doctor's title is becoming almost valueless by the tremendous number of persons who are flaunting it.

Not many years since, the writer crossed the ocean and had at his right hand in the dining saloon, a very distinguished appearing gentleman. This man, as subsequent events developed, was not only an A.B., but a Ph.D. in

Have You a Case Like This?

"In March, 1921, I developed rheumatism, . . . spent three months in hospitals, . . . had seven specialists, no improvement, was a cripple, using two canes to help me along. One day I overheard a conversation between two women. 'What?' said the slender one, 'you weigh 236 pounds and play golf every day! Don't your feet give out?' 'Oh, dear, no,' said the plump one, 'I wear Cantilever Shoes.' So I 'phoned all the shoe stores until I found a Cantilever Store. The salesman fitted my feet with Cantilever Shoes. In less than a week I discarded my canes and I now do my housework, play tennis, dance, hike and have forgotten I have feet."

The Cantilever Shoe has a flexible shank, straight inner border, ample toe room, moderate high heel.

It forces the foot to exercise, strengthens and tones up muscles and ligaments.

It is the best shoe either for normal feet or weak foot which 75% of all people have.

Cantilever Shoes are worn by thousands of physicians who prescribe or recommend them to patients.

It is a shoe, not a splint.

It is also stylish, comfortable, durable and economical.

Send for physician's booklet, "Understand the Understanding."

There is a Cantilever Shoe Shop or Dealer in Every City

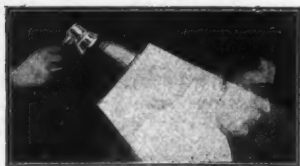
MORSE & BURT CO.,
412 Willoughby Ave.,
Brooklyn, N. Y.

Send me booklet, "Understand the Understanding."

.....M. D.

..... St.

..... 1924 City State



WOUNDS

Light and Heat are remarkably efficient in treating wounds of all kinds. Not only is tissue repair very rapid, but the light effectually subdues all infection.

A striking result of this treatment is that healing occurs *without scars*. No induration forms around the edges of the wound. For facial wounds this treatment is especially valuable.

Radiant Light and Heat, the wonderful remedial agents of Nature, are most effectively utilized by the

Thermofite Radiant Light and Heat Applicator

A scientifically designed appliance that reflects the light in *parallel rays*. There is no focal spot to burn or blister even in prolonged applications. Remarkable heating effect is secured with minimum current consumption.

Used for years in Government and other hospitals and in private practice in the treatment of



**Colds
Eczema
Erysipelas
Female Complaints
Lumbago
Neuritis
Rheumatism
Sprains
and many other ills.**

Illustration shows Office Applicator No. 0670, 12" diameter, with stand, at \$30. No. 0645, Hand Applicator, has same design, 8" diameter, without stand, at \$10. Folding stand for No. 0645, \$6.00.

Genuine Thermofites are branded—Look for the name on top of applicator. It is your guarantee of satisfaction.

Write for literature on Radiant Light and Heat

H. G. McFADDIN & CO.

42 Warren Street

New York

Makers of Lighting Devices for 50 Years

course, and an honorary D.D. and LL.D. In addition he was and still is the president of one of our large and influential colleges.

He referred to himself as "Mr." His visiting cards carried his name without any sign of title. His wife referred to him as "Mr." When his attention was directed to this unusual procedure the president said that the country was being "doctored" to death; that we had musicians, high school teachers, journalists, druggists, chiropractors, chiropodists, and all sorts of people in all sorts and conditions of life who possessed a degree of doctor of something. He felt, he said, that the degree "Doctor" had been cheapened so much that he preferred to be known as "Mr." and as such he was known even to the students of his own college.

There are, of course, many men in the United States who have the legal right to use the title, having earned it in university study, but who never employ it. On the other hand, there are people galore who have been given honorary degrees who insist upon the use of the title and are very much offended if they are not addressed as "Doctor."

The situation is bad enough at best, but I feel that it could be improved by a modification of the German method. A physician should be known as Doctor, pure and simple. The holders of other degrees should have the nature of the degree after the word "doctor," so that a doctor of philosophy would be Dr. Phil.; the doctor of divinity would be Dr. Div.; the doctor of dentistry, Dr. Dent., etc. This would prevent the needless masquerading of pseudo doctors under what has always been a very honorable title. It would aid also in the re-establishment of the honorary title of Doctor in the minds of the people. Just now they must be in a state of mental turmoil to know just how to differentiate between the great number of "Doctors."

The Story of Pepsodent

In 1911, Dr. H. C. Pickerill announced his experiments which proved that a dentifrice should be mildly acid. In the next few years other authorities announced a like conclusion.

Mild acidity increases the flow and fluidity of the saliva, to better wash the teeth.

It increases the alkalinity of the saliva, to better neutralize mouth acids.

It increases the ptyalin index of the saliva, to better digest starch deposits.

It acts to curdle fresh mucin plaque, and to disintegrate it at all stages of formation.

An alkaline dentifrice, containing soap, chalk or magnesia, has just the opposite effects. It sacrifices these desirable results to momentary alkalinity.

* * *

Leading dentists everywhere have accepted these principles, and Pepsodent meets the requirements. Many clinical tests have proved the principles right, and the dentifrice effective and safe.

The use has rapidly spread the world over. Today careful people of some fifty nations employ it, largely by dental advice.

* * *

Of course, opposition came. Some attacked the mild acid, some the polishing agent.

Then numerous authorities—some at our request, some without it—made exhaustive tests. Natural teeth were immersed for four years in Pepsodent mixed with saliva. Natural teeth were brushed with Pepsodent up to one million strokes.

Thus every question was answered in a final way, and all of them in Pepsodent's favor.

* * *

Our literature tells of these tests and experiments, and tells the reasons for Pepsodent in an authoritative way. Please send coupon for it.

Pepsodent PAT. OFF.
REG. U.S.
The Modern Dentifrice

THE PEPSODENT COMPANY, 4440 Ludington Bldg., Chicago, Ill. 1666

Please send me, free of charge, one regular 50c size tube of Pepsodent, with literature and formula.

Name

Address

Enclose card or letterhead

New Instruments and Appliances

Our readers are requested to advise us of new and improved instruments, appliances and equipment. Where possible always furnish photographs or drawings.

The W & T Chlorine Inhalator

THE W & T Chlorine Inhalator has been developed for the use of general practitioners in giving the Chlorine Gas treatment to individual patients.

It is based on the investigations and findings of Drs. Edward B. Vedder, Lt. Col. U. S. M. C., and Harold P. Sawyer, Capt. U. S. M. C., to the effect "that 0.015 milligrams of Chlorine per litre of air was the optimum concentration . . . that 0.017 milligrams of Chlorine per litre of air causes irritation of the throat, while a concentration below 0.01 milligrams per litre was too low to be effective." (This quotation is taken from Bulletin No. 61 issued by the manufacturers, Wallace & Tiernan Co.)

"A small electric motor, operated from the house current, drives a blower delivering air from the outlet of the equipment at a rate of approximately $7\frac{1}{2}$ cubic feet per minute, the air flow being metered and indicated as shown on the accompanying illustration. The chlorine is generated by the electrolysis of a special chlorine electrolyte, the current being supplied from three dry cells located in the bottom of the box. The rate

of chlorine generation is controlled by a rheostat and is indicated on a meter. Adjustments of chlorine dosage to the exact proportion desired is instantaneously obtained. During the hour for which the patient should inhale the chlorine-treated air, no inconvenience will be experienced. The physician can start the Inhalator and it will operate without further attention, permitting him to see other patients. There are no escaping odors noticeable to others in the office or waiting room. The mask (which is made of paper and is replaced for each patient) fits easily over the face and the patient can read or do work at a desk as desired.

Three dry batteries will give approximately 100 hours' treatment. A new charge of electrolyte is used for each treatment. The cost of the batteries, the current to drive the motor, and the electrolyte is less than two cents per treatment."

Further information may be obtained from the manufacturers, Wallace & Tiernan Co., Newark, N. J.



The W & T Chlorine Inhalator with cover in place

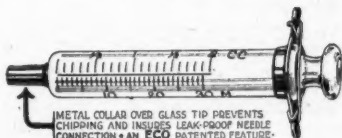


The W & T Inhalator showing location of Batteries used to generate Chlorine

(Another article in this department will be found on page 37.)

Doctor—**We Want You to Know****These ECO Products—**

PATENTED ECO NEEDLE CONTAINER PROTECTS NEEDLES FROM DUST, DIRT OR DAMAGE AND MAKES STERILIZATION VERY EASY * * *



METAL COLLAR OVER GLASS TIP PREVENTS CHIPPING AND INSURES LEAK-PROOF NEEDLE CONNECTION * AN ECO PATENTED FEATURE *

We believe that the best way to acquaint physicians with the advantages of ECO Thermometers, Syringes and Needles is through actual use.

So, we make this introductory offer of:

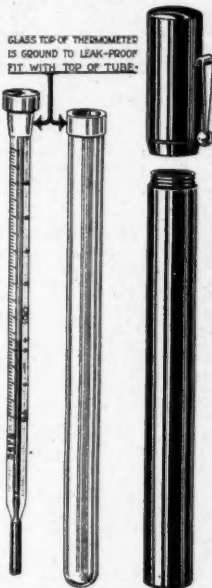
	Regular Price
1 ECO 60 Sec. Self Sterilizing Thermometer	\$2.75
*1 ECO 2 c.c. Glass Syringe	1.25
12 ECO Needles in Sterile Containers	1.50
	<hr/> \$5.50

—FOR \$4.00

Physicians may take advantage of this offer and order through a Surgical Instrument and Drug Dealer or directly from us.

EISELE & COMPANY
Manufacturers of ECO Products
Nashville, Tenn.

*With Special Scale for Insulin if desired.



ECO Self Sterilizing Thermometer. Compact, handsome, practical. Solution will not flow out even when thermometer is removed and container laid flat on table or desk. Thermometer guaranteed accurate.

Use This Coupon and Save \$1.50

In order to obtain introductory offer of ECO Products, it is necessary for physicians to use this coupon. Either mail it direct or present it to your Surgical Instrument or Drug Dealer.

Name.....

Address.....

Dealer.....

Eisele & Co., Nashville, Tenn.

SALE OF NAVY SURPLUS

MEDICINES, SURGICAL INSTRUMENTS AND APPLIANCES

by
SEALED PROPOSAL

11 A. M. (Eastern Standard Time) 5 December, 1924 Catalogue 257-B

The following material will be offered:

MEDICINES

12,000 bottles (500 cc. btl.) Cincho- nae, tincture composita	6,000 bottles (5 gm. btl.) Procaine
10,000 jars (50 gm. jars) Hydrargyri massa	8,000 bottles (25 gm. btl.) Quininae, chlorhydrosulphas
	Also many other medicines

ANTISEPTICS and DISINFECTANTS

20,000 bottles (500 gm. btl.) Barli dioxidum	1,500 bottles (100 in. btl.) Sulphone- thylmethanum 0.324 gms.
---	---

Also many other antiseptics and disinfectants

HYPODERMIC TABLETS

(20 in tube)

5,000 tubes Emetinae hydrochlor (1/3 grain)	50,000 tubes Quininae chlorhydro- sulph (1 grain)
50,000 tubes Hydrarevri succinimi- dum (1/5 grain)	Also many other hypodermic tablets

SURGICAL INSTRUMENTS and APPLIANCES

90 cases, Necroscopic	2,000 Forceps, tongue holding
2,000 cases, Pocket	2,000 Needle holders
2,000 cases, Syringe	600 Ophthalmoscopes
975 cases, Venereal	Also many other instruments and appliances
2,450 Catheters, return	
3,000 Clamps, towel	

SURGICAL DRESSINGS

2,000 rolls Paper for wet dressings, Impervious

DISPENSARY and LABORATORY EQUIPMENT

Apparatus supports with 3 rings; cork borers; cork pressers; measures, Seid-
litz powder; Mortars and pestles, Wedgwood; Spatulas; Metric weights

HOSPITAL and NURSING APPLIANCES

300 Close Stools	3,000 Pads, operating rubber
Also many other hospital and nursing appliances	

BOOKS

Large quantity medical books

Bids will be opened at the Central Sales Office, Navy Yard,
Washington, D. C.

Write or wire for Catalogue 257-B, giving detailed information
relative to the items included in this sale

CENTRAL
NAVY YARD

SALES
: : :

OFFICE
WASHINGTON, D. C.

(Concluded from page 34)

The Hanes Table Improved

W. D. Allison Company, Indianapolis, Ind., are announcing improvements to their Hanes Table. These improvements apply to the attachments for adjusting the headrest and the legrest.

The manufacturers state that in its present form "this table overcomes the discomfort and inconvenience of the old-knee-chest position" . . . Also that "the inverted position places the patient



in such a position that the movable pelvic viscera are all pulled toward the diaphragm by gravity so that when the sphincter is dilated with a speculum the bowel is distended by air pressure and exposed to view for some distance through the proctoscope."

The table is mounted on a revolving pedestal and can be raised and lowered by foot-levers from the minimum height of 30 inches to the maximum height of 39 inches.

Further information on request to W. D. Allison Co., Indianapolis, Ind.

A man is "alive" in the degree that he uses his senses—eyes, ears, nose, palate and finger tips.



Physicians tell us:

That the vapor evolved by the use of Listerine in the sick-room proves very refreshing to the patient. It is applied by means of a spray or by saturated cloths hung about in the room.

Enclosed with every bottle of Listerine, there is a circular discussing in detail the many uses of this product. We believe you will be interested in giving this circular a careful reading.

LISTERINE

—the safe antiseptic

Made by

**Lambert Pharmacal
Company**

NEW YORK ST. LOUIS
TORONTO PARIS LONDON
MADRID MEXICO CITY

Also makers of Listerine Tooth
Paste, Listerine Throat Tablets
and Listerine Dermatic Soap

Financial Department

The purpose of this column is to provide the physician-investor with reliable investment information and to help him in choosing sound securities that meet his requirements.

Each month we will review briefly the financial situation and outlook and answer several questions of general interest on investment.

EVIDENCE continues to appear showing that business is improving. Industrial production, car loadings, employment and wages have all shown substantial increases, since August and on the basis of present prospects this improvement should continue during the remaining months of this year and well into 1925. This improvement, moreover, is more than a merely seasonal movement, for it is based on certain developments which point very definitely toward the inauguration of a period of general prosperity.

In previous reviews we have discussed the pronounced change for the better which has come over the agricultural situation. The final estimates of crop yields are now in and it is found that they are even better than the early estimates. This is especially true of wheat and the wheat farmers are the ones who have suffered most in the depression since 1920. Moreover, owing to the smaller Canadian production and a light harvest in Europe, the increased yield in this country is accompanied by higher prices. (Doctors in the wheat belt have undoubtedly already noted an improvement in their collections.) Along with this domestic development is the equally favorable one of the improving prospects for trade with Europe. The quick success of the German Government loan flotation at New York and London has greatly clarified the atmo-

sphere and made it possible for the leading nations to begin to put into operation the notable reforms guaranteed by the adoption of the Dawes Commission Report. The greatest obstacle, unquestionably, to the establishment of stable and prosperous conditions has been the unsettled state of Europe, for there is considerable reason to believe that it has been largely responsible for our agricultural depression. The prospects now are that improving conditions in Amer-

Upon request, information concerning investments will be furnished to readers of MEDICAL ECONOMICS. We will not answer questions regarding purely speculative issues. Address all inquiries enclosing a stamped envelope to the Financial Editor, MEDICAL ECONOMICS, 256 Broadway, New York, N. Y.

ican agriculture will be supported by the recovery of industry in Europe. The only other factor necessary at any time for the inauguration of a period of substantial prosperity is an abundance of liquid capital and credit available to support enterprise in any

and every direction in which development is needed. That requisite also is present for the business community has never been more amply equipped with financial resources.

To sum up so far as economic conditions are concerned the outlook today for a broad and substantial industrial revival is more favorable than at any time since the war. The only cloud on the business horizon at the present time is to be observed in the growth of a radical party in this country, and there is considerable reason to believe that given a full measure of prosperity its influence as a political factor will shortly wane.

Financial Questions and Answers

Belgium 6½s.

QUESTION: I have about \$1,000 in the savings bank which I wish to invest. My other investments are as follows: \$3,000 in Liberty Bonds, \$3,000 in municipal bonds, \$3,000 in real estate mortgages, \$1,000 St. Louis, San Fran. R. R. prior lien 4s and \$1,000 New York Central R. R. ref. and imp. 5s 2013. I also own my own home. My income is sufficient to cover my living expenses and permit of a small annual saving. I have thought of investing this \$1,000 in a bond of the Kingdom of Belgium 6½s, which was recently issued. What do you think of my choice?

K. H.

ANSWER: Kingdom of Belgium 6½s, due September 1, 1949, are a direct obligation of the government. By the terms of the loan contract the Kingdom of Belgium agrees that if in the future it shall issue by public subscription any loan having a lien on any specific revenue or assets these bonds shall

be secured equally and ratably with such loan. In the light of your other holdings we believe that you are warranted in placing \$1,000, in this issue.

Two Sound Stocks.

QUESTION: I have \$1,000 to invest and would like your opinion of Union Pacific preferred and General Electric special, \$500 each. I am making my first investment and want safety and a fair yield. Your advice will be very much appreciated, as I have no experience whatsoever in investing money.


S. B.

ANSWER: These two stocks are among the best that you could possibly find. Either of them would give a high degree of safety for your \$500.

\$3,000 for Investment

QUESTION: I am a young physician with a reasonably prosperous practice and will have

(Concluded on next page)



What Did These Railroads Earn Last Year?

The Southern group of railroads earned a higher percentage last year than any other regional group of railways.

Railroad earnings are a guide to the investor. The South, with its varied industries, is a good place to invest. You can still get 7% on first mortgage security, if you buy Miller First Mortgage Bonds secured by apartment structures, hotels and business buildings in growing Southern cities. Write today for descriptive circulars.

G. L. MILLER & CO.
INCORPORATED

4511 Carbide and Carbon Building, 30 East 42nd Street, New York
Philadelphia Pittsburgh St. Louis Buffalo Atlanta Memphis Knoxville
No Investor Ever Lost a Dollar in Miller Bonds

Bowel Atonicity

is a common affliction of faulty diet, advancing years, or the "cathartic habit." The intestinal muscles become sluggish and lose their power, as a consequence of which, the bowel contents are delayed in their passage, over-absorption takes place, and the feces become hardened and reduced in bulk.

In AGAROL COMP.—a palatable, carefully balanced combination of pure mineral oil, agar-agar, and phenolphthalein—the practitioner has a remarkably efficient remedy for correcting the foregoing conditions and permanently restoring the functional activity of the bowel.

As a result of its use, not only, therefore, does Agarol Comp. give remarkable satisfaction as an evacuant, but regularly employed, it soon restores conditions within the intestinal canal essential to its muscular tone and natural activity, and thus enables the bowels after a reasonable period, to act normally and regularly without further aid or assistance.

AGAROL is the original Mineral Oil—Agar-Agar Emulsion, and has these special advantages: Perfectly homogenized and stable; pleasant taste without artificial flavoring; freedom from sugar, alkalies and alcohol; no contraindications; no oil leakage; no griping or pain; no nausea or gastric disturbances; not habit forming.

Bottle and literature mailed gratis, upon request.

WM. R. WARNER & CO., Inc.
Manufacturing Pharmacutists since 1856

113-123 West 18th Street,
New York City

(Concluded from preceding page)

\$3,000 to invest on December 1. I am not dependent on the income from investments and would like to have you suggest a list which would yield me as high an interest rate as I can secure with comparative safety. Besides the above I have \$4,000 invested in local real estate and about \$2,000 in the savings bank.

B. L.

ANSWER: You would get a good degree of safety and a satisfactory return by distributing your funds among Consolidated Gas of Baltimore 6s, 1949; Kingdom of Norway 6s, 1943; Anaconda Copper 6s, 1953; Standard Oil of New Jersey preferred stock and United States Steel preferred stock.

The happiest people in this world are those who cultivate the virtue of open-mindedness. An open mind is more to be admired and more to be desired than great riches.

IODOTONE

A standardized glycerole of hydrogen iodide, each dram representing one grain of iodine, for oral use. Especially beneficial in the treatment of Asthma, Bronchitis, Goiter, Pneumonia, Arterio-Sclerosis and Rheumatism.

EIMER & AMEND

207 THIRD AVE., NEW YORK

Coupon for Free Sample

Name

Street

City



The Chemist Showed

why physicians have recommended Reuter's Soap for over 40 years

Thousands of physicians have been advising Reuter's Soap for the tender skin of infants and for general toilet use for over 40 years. They judged by results alone — they saw the great cleansing power, the very gentle action, the surprising helpfulness of this wonderful soap to sensitive skin. Reuter's mild creamy lather has convinced American physicians more sincerely than all the unfounded assertions broadcasted to the American woman by clever but misleading advertisements. An ideal soap in every respect, it has increased in popularity during two generations.

Amazing facts in this report

And now the chemist has found the *basic reasons* for the popularity of Reuter's Soap. The results of the investigation of a prominent New York laboratory after a thorough test of seven well-known brands, (including the best grade of Imported Castile) show *why* Reuter's is, beyond a shadow of doubt, America's finest toilet soap.

Send for a resume of this report. Every physician should have one. A full sized trial cake goes with it on request.

Reuter's Soap

Made and Guaranteed by
REUTER-BARRY, Inc.
26-28 Beaver St., N. Y.

REUTER-BARRY, Inc., 26-28 Beaver St., N. Y.

Name _____ Address _____

This Month's Free Literature

The brief paragraphs on this page are designed to keep busy physicians informed about useful literature and samples offered by manufacturers of instruments, appliances and pharmaceutical products. Our readers are requested to mention MEDICAL ECONOMICS when writing the manufacturer for this literature.

NESTLE'S FOOD CO., Nestle Bldg., New York, will send the medical profession on request a full-size package of their product and descriptive literature.

* * *

Physicians doing tonsil work will be interested in a pamphlet describing the "Waring Suction Tonsillectomy." This is issued by the MIM COMPANY, Woodward Bldg., Washington, D. C.

* * *

"Reargon" is the title of a circular describing a product of the same name for the treatment of Gonorrhea. It contains interesting microscopical views illustrating the penetrating and germicidal qualities of the product. Write C. P. CHEMICAL CO., Grand Central Term. Bldg., New York, for copies.

* * *

A new publication entitled "The Radiological Review," devoted to the progress of X-ray and Radium, as it relates to the practicing physician and dentist, has made its appearance. It is published bi-monthly and consists of forty pages of good reading matter. Copies sent upon request to the RADIOLOGICAL REVIEW PUB. CO., P. O. Box 152, Quincy, Ill.

* * *

Physicians who already dispense, or who contemplate dispensing, will doubtless be interested in a reprint of an article to appear soon in The Medical World telling how to increase their professional incomes, ethically, practically, profitably and successfully. Complimentary copies may be had by writing for "Dispensing vs. Prescribing" to the Service Department of THE DRUG PRODUCTS CO., INC., 166

Meadow St., Long Island City, N. Y.

* * *

"The Corset as a Therapeutic Agent" is the title of a booklet which is being sent out by the BERGER BROS. Co. of New Haven, Conn. This sets forth plainly how and why the Spencer Corset can be prescribed with great practical benefit by physicians when called upon to treat Enteroptosis, Sacro-Iliac Sprain, Movable Kidney, Hernia, Pregnancy, etc. Copies will be sent on request.

* * *

"Chlorine as a Therapeutic Agent in the Treatment of Respiratory Diseases" is the title of an attractive and well-illustrated 16-page booklet containing a brief history of the origin and development of the Chlorine Treatment and a complete description of the apparatus devised for it by WALLACE & TIERNAN, INC., Newark, N. J. Interested physicians may obtain copies by writing the company for Technical Bulletin No. 61.

* * *

A little publication entitled "K-S Service" came into existence in July, 1924. It is published by the KNY-SCHEER CORP. OF AMERICA and states frankly that it is "Dedicated to the Building of Good Will." Its purpose will be to keep the medical profession advised on medical and surgical instruments, equipment and apparatus; to include a bit of humor and to tell physicians about Kny-Scheer products. Physicians who do not receive this publication will be placed on the mailing list by the Company on request. Address them at 119 7th Ave., N. Y. C.

"Filling the Sunshine Prescription" is the title of a concise, well-illustrated booklet published by the EL PASO GATEWAY CLUB, El Paso, Texas, for interested members of the medical profession. Contents of this booklet have been approved by the El Paso County Medical Society.

E. LEITZ, INC., 60 E. 10th St., New York City, describes a complete line of Haemacytometers and accessories in their pamphlet

No. A 131B. Copies will be sent on request to the company.

* * *

THE AMERICAN KREUGER & TOLL CORP., 522 Fifth Ave., have issued a 16-page booklet on the "Manual of Technique for the Non-Burning ULTRA Sun Lamp." It very briefly discusses this method of treatment in Gynaecology; Eye, Ear, Nose and Throat; Internal Medicine; Children's Diseases, and Surgery. Copies on request to the above company.

For the treatment of
Biliary and Hepatic Disorders
 and the prevention of
Gallstones
AGO-CHOLAN

Supplied in 2 grain tablets.
 Tubes of 20 and vials of 50 tablets each.

Treatment with AGO-CHOLAN should begin upon symptoms of a sluggish bile or at the first signs of an approaching attack of gallstone colic. The dosage necessary for effective results is small, usually two tablets two or three times a day directly after meals.

For literature and samples apply to

E. BILHUBER, Inc., 23 West Broadway, NEW YORK

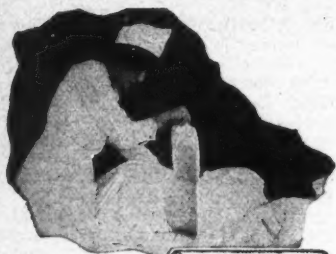


THE STANDARD
LOESER'S INTRAVENOUS SOLUTIONS
 CERTIFIED

Complete information on Intravenous Therapy, including "The Journal of Intravenous Therapy," will be sent on request.

New York Intravenous Laboratory

Producing Ethical Intravenous Solutions for the Medical Profession Exclusively
100 WEST 21st STREET, NEW YORK



**FOR
PLEURISY,
INFLUENZA,
LA GRIPPE,
PNEUMONIA**

FORMULA

Guaiacol 2.6, Formalin 2.6

Cresolite 13.02, Quinine 2.6

Methyl Salicylate 2.6

Glycerine and Aluminum Salt,
ratio, 10:1000 parts.

Aromatic and Antiseptic
Oils, q.s.

Pneumo-Phthisine

Used promptly and persistently in these conditions, PNEUMO-PHTHYSINE has for years proved an invaluable aid to the physician.

Even in common cough or cold, it is of value in preventing the development of more serious conditions, as it affords quick relief, with no bad after-effects and no derangement of the digestive organs.

The formula of PNEUMO-PHTHYSINE tells the story. In this emplastrum the medicaments are presented in a form suitable for absorption through the skin.

PNEUMO-PHTHYSINE brings about an immediate decrease in fever temperature, and holds the temperature under control, at the will of the physician.

It is an ethical product, which is not advertised to the public.

Send This Coupon for Clinical Trial Specimen

Pneumo-Phthisine Chemical Co.

Dept. M. E.

220 WEST ONTARIO ST., CHICAGO, ILL.

Pneumo-Phthisine Chemical Co.

Dept. M. E., 220 W. Ontario St., Chicago.

Gentlemen:

Please send me, free of charge, a clinical trial specimen of PNEUMO-PHTHYSINE.

Dr.

Address

A Regrettable Omission

In the August issue of MEDICAL ECONOMICS, on page 4, there appeared the following tribute to the medical profession:

I AM—

The Man who signed your Birth Certificate, and the man who will sign your Death Certificate. I stand by you in your hour of Greatest Happiness and your Hour of Greatest Sorrow. I listen to your Confessions not breathed to another soul, and keep them inviolate....

My Like Work is consecrated to serving and administering to your physical wants. Night or day, rain or shine, I am at your beck and call. I sacrifice my rest, my pleasure, my strength to comfort You....

As I wend myself past the Year Stones of Life toward the Eternal Sunset I am striving to be more charitable, more unselfish, more kindly, toward my Fellow Man....

I am the first one you think of in times of sickness and the last one thought of in times of health....

I am not rich because I serve suffering Humanity, which embraces the poor, whom we have with us always....

I am the man who cannot pay his grocery bill, his dry goods bill, his drug bill, or in fact Any Bill on Earth, until I am paid by You....

I AM—

YOUR FAMILY DOCTOR.

We have just learned that the author of this tribute is George C. Wellons, Vice-President of the William A. Webster Co., Memphis, Tenn.

Believing that the readers of MEDICAL ECONOMICS will be as interested to learn of the identity of the author as ourselves, we are publishing this item.

Do the truth you know and you shall learn the truth you need to know.—Geo. MacDonald.

Gynecologically Correct

The
Marvel
Whirling
Spray
Syringe

Always Gives Satisfaction



For Literature Address
MARVEL CO.
25 West 45th Street, New York



CHAPTER II

of Marks' "MANUAL OF ARTIFICIAL LIMBS" describes, without prejudice, various types of Artificial Feet, both from a mechanical and theoretic viewpoint. Copy of this 300-page book should be in every doctor's library.

This Coupon Will Bring It to You Free

A. A. MARKS,

696 Broadway, N. Y. C.

Please send me your Book, "Manual of Artificial Limbs," without charge. I agree to look it through carefully soon after receipt and to return it to you if I do not care to make it a part of my Medical Reference Library.

Name

Address

The Food for Growth



Contains
Red Bone Marrow, Marrow
Fat, Malt Extract, Eggs,
Lemon Juice and Salts of
Lime and Iron

The marked improvement in growth and development that follow the administration of Virol is due to:

Its wealth of Vitamins in their active state.

Its well balanced nature.

The ease with which it is assimilated in the most weakened and debilitated conditions of the intestinal tract.

VIROL

is a great aid to the physician in Rickets, Anaemia, Marasmus, all Wasting conditions, and for Expectant and Nursing Mothers.

Sole Agents for U. S. A.
GEO. C. COOK & CO., Inc.
59 Bank St., New York

*Write to-day for
sample and literature*

Name

Address

What Makes the Doctor Poor?

(Concluded from page 23)

lenses to one's eyes is so dependent upon the pathology of the refractive media that it is impossible to consider the physiology alone and yet that is what we are led to believe. A great percentage of all cases getting into the hands of a competent oculist or medical man have been, or will go, to the non-medical eye glass fitter, either by choice or by force at some time or other.

It is time we are working up to this great leak in the medical profession because it is only one step farther to the chiropractor, and the rest of the fool killers.

We need closer co-operation between doctors—between the medical man and specialist. Let us strive to see that our patients get better attention and that when they are referred from the general practitioner to the specialist that this medical man strives just as hard to see that they get back to the rightful adviser, the general practitioner.

Getting Medical Truth Across

(Concluded from page 27)

only advise the people along the lines of health examinations and disease prevention, but we could answer these fakirs, who have no hesitancy in publishing their false doctrines over their own names. The people reading this sort of "dope" get the wrong viewpoint. If they are not to be given the other side of the question in clear-cut, simple language they are likely to be won over to the evil doctrines of the cultists.

It is up to the medical profession to combat the quacks and make the spreading of their foolish announcement of no avail. Our hope lies in the efforts of the County Medical Societies.

Health Publicity That Pulled

(Concluded from page 17)

opinion has been—Continue the work!
TODAY.

Anent the periodic health examination idea.

Why not carry out the same plan?

Results would doubtless be equally as good and as far reaching.

The plan is sound and feasible.

"It has been estimated," says the American Industrial Lenders' Association, "that eighty-six men out of one hundred fail in life, counting failure from the viewpoint of dollars and cents. Of the fourteen who succeed, it is estimated only two make a marked success in life."

Which seems to show that misery not only loves company but has it.

Phosphorcin

A Reliable Reconstructive
No Sugar No Alcohol

It supplies the necessary phosphorus, in a readily assimilable form, to restore the impaired nerve cells.

Phosphorcin is used with success in the treatment of disorders of the Nervous System, Anemia, Chlorosis, Diabetes, Sexual Impotence and as a reconstructive during convalescence from acute febrile diseases. The dose is two teaspoonfuls in water after food.

Sample on Request.

EIMER & AMEND

Third Avenue and 18th Street, New York

When Sedative Action Is Imperative

especially under conditions requiring avoidance of stomach disturbances or those ill effects common to most bromides,

PEACOCK'S BROMIDES

will be found invaluable.

It is the foregoing that has made this preparation so uniformly dependable in all acute and chronic conditions needing sedative action, or in those cases where bromides require administration over long and continued periods.

A Sluggish Liver

must not be neglected in acute or chronic ills, or disaster is certain.

Innumerable are the cholagogues used and recommended, but most of these have the drawback of exciting too active catharsis.

CHIONIA

is the one stimulant of the hepatic functions that will produce its effect without at the same time setting up too great bowel activity.

It is easy to understand, therefore, how the obvious advantages of Chionia have given it the wide range of use it enjoys in countless gastric, hepatic and intestinal conditions.

PEACOCK CHEMICAL COMPANY, St. Louis, Mo.

To Physicians who will write in, mentioning **MEDICAL ECONOMICS**, we will be glad to send liberal samples and interesting data.



A Compound Containing the Bile Salts,
Sodium Glycocholate, Sodium Tauro-
cholate with Cascara Sagrada and
Phenolphthalein

for
Hepatic Insufficiency, Habitual
Constipation and Gall Stones

Taurocol Compound Tablets (TOROCOL)

With Digestive Ferments
and Nux Vomica

A remedy for all forms of Dyspepsia
and Disorders of the Liver and Bile Tract

Manufactured Exclusively for
Physicians, Prescriptions
and Dispensing

THE PAUL PLESSNER CO.
DETROIT, MICH.

Personal Medicine vs. Mass Health Protection

(Concluded from page 21)

examination is not a mere physical inventory. If it is to be worth while it must include an evaluation of the individual—his habits and his actions—in relation to his peculiar environment.

Upon, and only upon an intelligent personal medical interpretation of all the facts, can the promotion of better health for the particular individual be brought about.

REPRESENTATIVES WANTED

Physician or high-grade detail man calling on urologists, dermatologists and physicians to handle side line on straight commission basis for the largest house of its kind in America.

This is a real opportunity for the right man and should lead to life connection depending upon applicant. Our representatives know of this advertisement.

Address: Crow, Mgr., Box 421,
General Post Office, New York City.

Bowel Inactivity

calls for efforts that not only will empty but restore as promptly and satisfactorily as possible, the physiologic action and tone of the intestinal tract.

To accomplish this

PRUNOIDS

has no superior. Absolutely free from irritating effect, this ideal laxative never gives rise to griping or extreme peristalsis, but through its stimulation of natural processes, produces as near to normal or physiologic evacuations, as may be possible.

The "Limping" Heart

is at once supported and regulated by the systematic use of

CACTINA PILLETS

Thus employed Cactina gradually improves the nutrition and tone of the heart muscle, restores the cardiac rhythm and renders the heart more resistant to irritating influences.

Cactina is a true cardiac tonic without cumulative effect.

SULTAN DRUG COMPANY

St. Louis, Mo.

To Physicians who will write in, mentioning MEDICAL ECONOMICS, we will be glad to send liberal samples and interesting data.



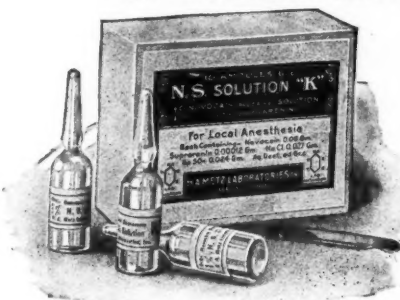
"METZ MEDICINALS"



IN EVERY DAY PRACTICE

NOVOCAIN

Sets the Standard for Local Anesthesia



For Minor Surgery, the Practitioner will find the Ready-to-Use Ampules of Novocain - Supra-renalin Solution "K" Convenient, Dependable, Safe and Efficient.

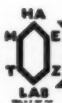
PYRAMIDON



The Antipyretic and Analgesic of Choice

It can be employed in Influenza, Pneumonia and All Other Conditions in which Antipyresis and Analgesia is Sought.

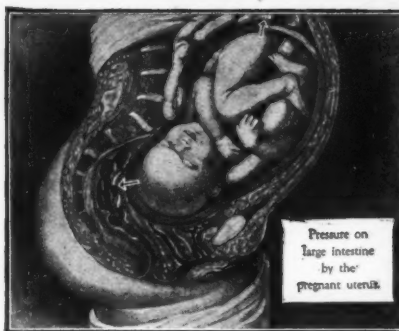
Why Not Use These Dependable Originals?



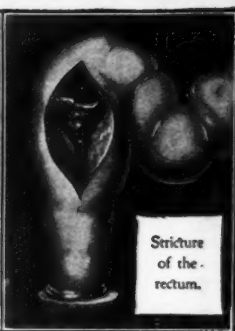
H.A. METZ LABORATORIES, INC.

122 HUDSON ST. NEW YORK





Pressure on
large intestine
by the
pregnant uterus



Stricture
of the
rectum.

Constipation in Pregnancy

As you know, at least half the cases are subject to constipation due to pressure of the uterus and loss of tonicity of the abdominal walls. Consequent straining at stool leads to hemorrhoids.

Lesions accompanying eclampsia, vomiting in pregnancy and acute yellow atrophy of the liver are all influenced by bowel conditions. Furthermore, toxins from constipation put an additional strain upon the kidneys.

The health of both mother and child are jeopardized by the indiscriminate use of catharses. Saline catharses deplete the system of body fluids and are particularly harmful in pregnancy. Cathartics which act through ini-

tiating peristalsis may even lead to abortion.

A lubricant is the best peristaltic regulator during pregnancy, according to a prominent gastroenterologist. It does not upset digestion and acts both locally and generally in the intestine.

Nujol, the ideal lubricant, is the *therapeutic common denominator* of all types of constipation. Microscopic examination shows that too high a viscosity fails to permeate hardened scybala; too low a viscosity tends to produce seepage. Exhaustive clinical tests show the viscosity of Nujol to be physiologically correct and in accord with the opinion of leading medical authorities.

Nujol

REG. U.S. PAT. OFF.

For Lubrication Therapy

Made by NUJOL LABORATORIES, STANDARD OIL CO. (New Jersey)

